

**DECLARATION
AND POWER OF ATTORNEY
U.S.A.**

FOR ATTORNEYS' USE ONLY

ATTORNEYS' DOCKET NO.

P66714US0

ALL PATENTS, INCLUDING DESIGN
FOR APPLICATION BASED ON PCT; PARIS CONVENTION;
NON PRIORITY; OR PROVISIONAL APPLICATIONS

As a below named inventor, I declare that my residence, post office address and citizenship are stated below next to my name, the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed at 201 below), or an original, first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) of the subject matter which is claimed and for which patent is sought on the invention entitled:

DEBUGGING OF MULTIPLE DATA PROCESSORS

which is described and claimed in: PCT International Application No. _____ filed _____
 the attached specification the specification in application Serial No. _____ filed July 30, 2001

(if applicable) and amended on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

S2000/0603 (Number)	IRELAND (Country)	28 July 2000 (Day/Month/Year Filed)	Priority Claimed
PCT/IE01/00002 (Number)	INTERNATIONAL (Country)	8 January 2001 (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(Number)	(Country)	(Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

Application No. 60/293,225 Filing Date May 25, 2001 Application No. _____ Filing Date _____

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.) (Filing Date) (Status: patented, pending, abandoned)

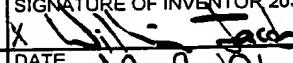
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys (Registration No.) to prosecute this application, receive and act on instructions from my agent, and transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACOBSON, JR. (20,851); JOHN CLARKE HOLMAN (22,769); MARVIN R. STERN (20,640); ALLEN S. MELSER (27,215); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); YOON S. HAM (45,307) and NATHANIEL A. HUMPHRIES (22,772)

SEND CORRESPONDENCE TO: CUSTOMER NO. 00136 or JACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY 400 SEVENTH STREET, N.W. WASHINGTON, D.C. 20004	DIRECT TELEPHONE CALLS TO: (please use Attorney's Docket No.) (202) 638-6666 JACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY
--	---

*Inventor(s) name must include at least one unabridged first or middle name.

20 FULL NAME * OF INVENTOR BYRNE	FAMILY NAME BYRNE	GIVEN NAME Michael	MIDDLE NAME A.
RESIDENCE & CITIZENSHIP	CITY Navan	STATE OR FOREIGN COUNTRY IRELAND	COUNTRY OF CITIZENSHIP IRELAND
POST OFFICE ADDRESS	POST OFFICE ADDRESS 214 Athlumney Castle, Athlumney	CITY Navan, County Meath	STATE OR COUNTRY IRELAND
202 FULL NAME * OF INVENTOR HORRIGAN	FAMILY NAME HORRIGAN	GIVEN NAME John	MIDDLE NAME J.
RESIDENCE & CITIZENSHIP	CITY Dublin	STATE OR FOREIGN COUNTRY IRELAND	COUNTRY OF CITIZENSHIP IRELAND
POST OFFICE ADDRESS	POST OFFICE ADDRESS 25 Albert College Street	CITY Glasnevin, Dublin	STATE OR COUNTRY IRELAND
203 FULL NAME * OF INVENTOR JACOB	FAMILY NAME JACOB	GIVEN NAME William	MIDDLE NAME G.
RESIDENCE & CITIZENSHIP	CITY Dublin	STATE OR FOREIGN COUNTRY IRELAND	COUNTRY OF CITIZENSHIP IRELAND
POST OFFICE ADDRESS	POST OFFICE ADDRESS 9 Albert Place East, Grand Canal Street	CITY Dublin	STATE OR COUNTRY IRELAND
ZIP CODE 9			ZIP CODE 2

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201*	SIGNATURE OF INVENTOR 202*	SIGNATURE OF INVENTOR 203*
		
DATE 3 - 10 - 01	DATE 10 - 9 - 01	DATE 10 - 9 - 01

Additional inventors are named on separately numbered sheets attached hereto.

© JH 2001 (COPYING WITHOUT DELETIONS PERMITTED)



JACOBSON HOLMAN PLLC
ADDITIONAL INVENTORS

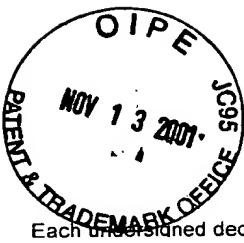
* Inventor(s) name must include at least one unabbreviated first or middle name.

204	FULL NAME OF INVENTOR	FAMILY NAME MOORE	GIVEN NAME Th mas	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY Dublin	STATE OR FOREIGN COUNTRY IRELAND	COUNTRY OF CITIZENSHIP IRELAND
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 Ardee Grove, Ardee Road	CITY Rathmines, Dublin	STATE OR COUNTRY IRELAND
205	FULL NAME OF INVENTOR	FAMILY NAME O'RIORDAN	GIVEN NAME Martin	MIDDLE NAME Jude
	RESIDENCE & CITIZENSHIP	CITY Maynooth	STATE OR FOREIGN COUNTRY IRELAND	COUNTRY OF CITIZENSHIP IRELAND
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Bryanstown Avenue, Ladychapel	CITY Maynooth, County Kildare	STATE OR COUNTRY IRELAND
206	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY
207	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY
208	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY
209	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY
210	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY
211	FULL NAME OF INVENTOR	FAMILY NAME	GIVEN NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204 *	SIGNATURE OF INVENTOR 205 *	SIGNATURE OF INVENTOR 206 *
DATE 10/9/2001	DATE 9/9/2001	DATE
SIGNATURE OF INVENTOR 207 *	SIGNATURE OF INVENTOR 208 *	SIGNATURE OF INVENTOR 209 *
DATE	DATE	DATE
SIGNATURE OF INVENTOR 210 *	SIGNATURE OF INVENTOR 211 *	
DATE	DATE	

Additional inventors are named on separately numbered sheets attached hereto.
©JH 2001 (COPYING WITHOUT DELETIONS PERMITTED)



Law Offices of
JACOBSON, PRICE, HOLMAN & STEPHEN
PROFESSIONAL LIMITED LIABILITY COMPANY
THE JENIFER BUILDING
400 SEVENTH STREET, N.W.
WASHINGTON, DC 20004

#3

Attn's Docket No.

SMALL ENTITY DECLARATION
[37 CFR 1.9(c-f)]

Each undersigned declares that:

- (1) the application attached hereto.
- (2) U.S. Application Serial No. _____ filed _____
- (3) U.S. Patent No. _____ issued _____

is entitled to the benefits of "small entity" status for paying reduced fees under 35 USC 41(a) and (b) to the Patent and Trademark Office by virtue of the following:

(4) Each undersigned declares that he/she qualifies as an independent inventor, or would qualify had he/she made the as defined in 37 CFR 1.9(c).

(5) The undersigned declares that he/she is an official empowered to act on behalf of the concern identified below; that this concern qualifies as a small business concern as defined in 37 CFR 1.9(d); that exclusive rights to the invention have been conveyed to and remain with the small business concern, or if the rights are not exclusive, that all other rights belong to small entities as defined in 37 CFR 1.9.

(6) The undersigned declares that he/she is an official empowered to act on behalf of the organization identified below; that this organization qualifies as a nonprofit organization as defined in

- (a) 37 CFR 1.9(e)(1)
(b) 37 CFR 1.9(e)(2)
(c) 37 CFR 1.9(e)(3)

(d) 37 CFR 1.9(e)(4) State law of _____
that exclusive rights to the invention have been conveyed to and remain with the organization, or if the rights are not exclusive, that all other rights belong to organizations as defined in 37 CFR 1.9.

(7) Each person, concern or organization to which I/we have assigned, granted, conveyed or licensed, or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

(a) no such person, concern or organization

(b) persons, concerns or organization listed below

[a separate declaration is required from each named person, concern or organization having rights to this invention averring to their status as "small entities."]

Full Name _____

Address _____

Individual

Small Business Concern

Nonprofit Organization

I/we acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement of small entity prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I/we hereby declare all statements made herein of his/her own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.

(8)	Typed Name of Inventor	Signature	Date
	Typed Name of Inventor	Signature	Date
	Typed Name of Inventor	Signature	Date
	Typed Name of Inventor	Signature	Date

(9) Name of Small Business Concern or Nonprofit Organization

DELVALLEY LIMITED

Typed Name

By R.N. Loglisci

Signature

12/6/01

Date

X NODALY COGHLAN DIRECTOR
Title of Signatory